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I.

**Report on the Meeting of the Health Committee, League of Nations, held in Paris
on 18th May, 1938.**

1. Professor Parisot, President of the Health Committee, in his introductory remarks referred to the absence of Dr. Madsen, Vice-President, and welcomed the Roumanian delegate, Professor Baltenaru. He reported that the Council of the League had accepted the proposal for strengthening the Health Committee by the appointment of Associate Members. These will be found on Appendix II [C. H. 1259 (2)]. Dr. Johan of Hungary has been appointed a full member.

The Agenda for the meeting is given in Appendix I (C. H. 1329).

2. The President laid before the meeting the Agenda for the Annual Assembly of the General Advisory Council of the Health Committee to be held on 13th and 20th May (Appendix III). This was adopted without change.

3. The minutes of the previous meeting of the Health Committee held on February 7th-9th, 1938 (Appendix IV) were adopted. This is a new procedure, but is one which is to be continued in future and with advantage.

4. Current Work:—

(a) The President and the Director of the Health Organisation gave a resume of the work of the "Preparatory Committee of the European Conference on Rural Life", Appendix V [C. 161. 1938. II. B]. It is hoped to collect data from 12 European countries on the subjects detailed on page 9 of this document. Some of these only will be dealt with by the Health Organisation, but the project seems to be an enormous one and a great deal will have to be done before October, 1938, if the material is to be ready in time for the Conference in 1939. The report was adopted after some discussion, in which it was pointed out that the field was almost too extensive.

(b) *Anti-epidemic work in China.*—The report [Appendix VI.—C. H. 1333 (1)] gives a brief description of the work done and being done by the Epidemic Commission in China. Dr. Boreic was present and, with the assistance of maps and photographs, gave a very interesting description of the fine work being carried out by the three units working in different parts of China. There had been practically no cholera, but smallpox occurred at different centres. Typhus fever was not common, though there were millions of refugees. My experience in India enabled me to appreciate the difficulties of organising anti-epidemic work in a vast country like China and it seemed to me that the money sanctioned by the League for this work was being well spent. Dr. Rajehman informed me that they had found it was much cheaper to manufacture cholera vaccine on the spot; this, *apropos* of an enquiry which had been made from the Singapore Bureau as to the possibility of getting supplies of the vaccine from India.

(c) *Collaboration with the Belgian Sanitary Administration*.—The notes given on pages 2 and 3 of the Agenda explain the position and the subject was passed without comment.

5. *Financial Questions* :—

(a) *Draft Budget for 1939*.—(Appendix VII). The three paragraphs on page 1 give details of the more important points. These are self-explanatory and although there was a considerable amount of discussion on the grant to the International Leprosy Centre at Rio de Janeiro and some comment on the expenditure on Biological Standardisation work, the items were eventually accepted.

(b) *Utilisation of funds allotted for 1938*.—The documents (Appendix VIII—C. H. 1332) were closely examined and different items were made the subject of questions. The Director of the Health Organisation and his Secretary explained the figures set out in the four Tables attached, after which the report and statements were adopted.

6. *Miscellaneous* :—

(a) I had forwarded to the Director of the Health Organisation a letter on the question of the frequency of the meetings of the Health Committee [Appendix IX—C. H. 1329 (a)] and asked him to place the matter on the Agenda. I explained the difficulty the delegates from countries far distant from Geneva had in appearing at meetings held 3 or 4 times a year and said I believed the work could be done with two full meetings a year. This would also reduce the cost to the League in respect of travelling allowances. I was supported by General Cumming, U. S. A. and by Dr. Jitta, President of the Office International d'Hygiène Publique. Dr. Rajchman stressed the necessity for elasticity in fixing meetings and reminded the Committee that the regulations contemplate the possibility of delegates sending substitutes. He also said the work might demand urgent unforeseen meetings, when I drew attention to the short notice which was sometimes given to members of the Health Committee. Finally he and the President both agreed that the Health Committee should give careful consideration to my proposal in fixing the dates of future meetings. As the present Health Committee has only one year to run, and as there might be difficulty in making changes at once, I did not further press my request, but I had the impression that more attention will be paid in future to the points raised and in that belief, I let the matter drop.

(b) A letter (Appendix X) received from the Western Branch of the Public Health Association, U. S. A. was placed before the meeting. General Cumming agreed to deal with the matter and to suggest a draft reply.

(c) Draft agenda (Appendix XI) for the meeting of the Health Committee which had been fixed for 30th June, 1938, was placed before the Committee. The question of whether the meeting should be postponed till October was discussed, especially as few of the items were urgent, but eventually it was decided to leave the date as previously arranged, mainly because the present meeting in Paris had been arranged hurriedly and many of the members had been unable to attend.

(d) The Report of the Advisory Committee on Radiotherapy of Uterine Cancer (Appendix XII) is attached.

II.

Report on the Annual Assembly of the General Advisory Health Council held in Paris on 19th and 20th May, 1938.

1. The President (Dr. Jitta) opened the meeting by extending a welcome to the delegates, and especially to Professor Schultz (Poland), Professor Balteanu (Roumania). Dr. René Saud and Dr. Strode (Rockefeller Foundation). Professors Sergent and Bigwood were also given a warm welcome.

2. Professor Parisot, Chairman of the Health Committee of the League of Nations, gave a long exposé of the items dealt with in "The Report on the work of the Health Organisation between June 1937 and May 1938, and on its 1938 Programme (C. H. 1323—Appendix III)". He also made a reference to each of the items on the Agenda of the Assembly (Appendix II), and to his letter of 30th March to Members of the Health Committee (Appendix I). Professor Parisot especially stressed the importance of the problems of the enteric fevers, of brucellosis and of tuberculosis among rural populations.

3. Professor Sergent, President of the Malaria Commission, then spoke at length on the recent general report of this Commission entitled "the treatment of malaria". It seems unnecessary to make detailed mention of his statement as the report itself will no doubt receive careful study by malariologists all over the world. Sir Aldo Castellani stressed the importance of large doses of quinine in the treatment of malaria particularly in tropical countries and, in his reply, Professor Sergent said he found himself in agreement with Castellani. Professor Balteanu in a brief speech drew attention to the great expense involved in the mass treatment of rural populations with quinine, a point of view with which I found myself in complete agreement.

4. Professor Bigwood, Secretary of the Nutrition Commission of the League of Nations, then addressed the meeting on recent work done by the Commission. No paper on this subject was circulated, but here again the next report of the Commission will without doubt be the subject of close study, both in Europe and the Far East, and it is unnecessary at the moment to say more than that Professor Bigwood gave a most interesting review of nutrition work being carried out all over the world and gave the impression that he was a complete master of this subject.

5. Dr. Rajchman followed by presenting the Java Rural Hygiene Conference Report to the Council and gave a masterly review of the different chapters of the report. Whilst I found myself in agreement with most of Dr. Rajchman's remarks, it seemed to me desirable to give to the Council more detailed information of the work which had been, and is being, done in India particularly in connection with Public Health Organisations, Nutrition and Malaria, in order to remove any impression there might have been that the Java Conference was the starting point of Indian activity in those respects. At the morning session of 20th May, I, therefore, gave a fairly detailed review of Indian work and, among other things, mentioned the inauguration by His Excellency the Viceroy of the Central Advisory Board of Health, the long continued work on Nutrition which had been carried out by the Indian Research Fund Association, the valuable research and other work done by the Malaria Survey of India and the new interest being taken in Tuberculosis through the appeal

made by Her Excellency Lady Linlithgow for funds for the foundation of an All-India Association for the Prevention of Tuberculosis. I also took the opportunity to thank the Dutch East Indies Government and their Public Health Officers for their generous hospitality and their efficiency in making the arrangements for the Conference in Bandung, which on all hands was admitted to be great success. In regard to the proposal made in the Conference Report that every country should form a National Nutrition Committee, I informed the Council that India had had for 3 years past a Nutritional Advisory Committee of the I. R. F. A. which in my opinion served all the purposes of a National Committee and that it was not proposed to duplicate this Committee. The further proposal in the report which suggested liaison between these National Committees and the Health Organisation of the League received my personal support, but I added that the question had not yet been considered by the Governing Body of the I. R. F. A. and that therefore I could give no definite assurance meantime, although I did not anticipate any difference of opinion on the matter.

The only criticism I made of the Conference was that the agenda was overloaded and Dr. Rajchman in a brief reply to my statement admitted the justice of this criticism.

6. Dr. Borcic, the Health Organisation's representative in China, was present at the Council meeting and gave a very interesting review of the work done by the three Epidemic Units sent to China to assist the Chinese Central Government. As a note on this subject (Appendix IV) was circulated, it is unnecessary for me to say more than that this activity of the Health Organisation has been of the greatest value, especially in the efforts to deal with the millions of refugees travelling west and south from the war areas. The delegate for China expressed the deep gratitude of his Government for the assistance rendered and the Japanese delegate made mention of the fact that the Japanese medical service was doing all it could be prevent the development and spread of epidemic diseases in the occupied areas.

7. Dr. Jitta in conclusion thanked Professor Parisot and the staff of the Health Organisation for their valuable assistance to the Council.

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*Not printed. Filed in the Office of the Public Health Commissioner with the Government of India.

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